

NOTICE OF PROPOSED RULE ADOPTION

STATE OF MISSISSIPPI

Mississippi State Board of Medical Licensure

Specific Legal Authority authorizing the promulgation of Mississippi State Board of Medical Rule: {Insert citation to state or federal statute, or rule Section 73-43-11 Licensure c/o Rhonda Freeman Reference to Rules repealed, amended or suspended by the 1867 Crane Ridge Drive, Suite 200-B Proposed Rule: { Insert citation to specific rule(s) repealed, Jackson, MS 39216 amended or suspended Chapter 08 Release of Medical Records (601) 987-3079 rhonda@msbml.state.ms.us Explanation of the Purpose of the Proposed Rule and the reason(s) for proposing the rule: {Insert here} The amendment to this regulation removes the wording that specifically addresses physicians and replaces it with licensee. This is due to the Board licensing and regulating professions other than physicians. This rule is proposed as a **/**Final Rule, and/or a **T**emporary Rule (Check one or both boxers as applicable.) Persons may present their views on the proposed rule by addressing written comments to the agency at the above address. Persons making comments should include their name and address, as well as other contact information, and if you are an agent or attorney, the name, address and telephone number of the party or parties you represent. **Oral Proceeding:** Check one box below: An oral proceeding is scheduled on this rule on Date: Time: Place: If you wish to be heard and present evidence at the oral proceeding you must make a written request to the agency at the above address at least _____ day(s) prior to the proceeding to be placed on the agenda. The request should include your name, address, telephone number as well as other contact information; and if you are an agent or attorney, the name, address and telephone number of the party or parties you represent. An oral proceeding is not scheduled on this rule. Where an oral proceeding is not scheduled, an oral proceeding will be held if a written request for an oral proceeding is submitted by a political subdivision, an agency or ten (10) persons. The written request should be submitted to the agency contact person at the above address within twenty (20) days after the filing of this notice of proposed rule adoption and should include the name, address and telephone number of the person(s) making the request; and if you are an agent or attorney, the name, address and telephone number of the party or parties you represent. **Economic Impact Statement:** Check one box below: The agency has determined that an economic impact statement is not required for this rule, or

Date Rule Proposed: November 19, 2009

Proposed Effective Date of Rule: 30 days from final filing.

Signature and Title of Person Submitting Rule for Filing

The concise summary of the economic impact statement required is attached.

The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.

Rhonda Freeman, Bureau Director

SOS FORM APA 001 Effective Date 07/29/2005 B C LUCEN

TELEPHONE: (601) 987-3079 FAX: (601) 987-4159

MISSISSIPPI STATE BOARD OF MEDICAL LICENSURE

To: Mississippi Secretary of State

From: Mississippi State Board of Medical Licensure

Date: November 19, 2009

Subject: Notice of Proposed Rule Adoption

Mississippi Code §73-43-11 gives the Mississippi State Board of Medical Licensure the authority to promulgate and publish reasonable rules and regulations necessary to enable it to discharge its functions and to enforce the provisions of law regulating the practice of medicine and the conduct of physicians.

The amendment to this regulation removes the wording that specifically addresses physicians and replaces it with licensee. This is due to the Board licensing and regulating professions other than physicians.

Any comments concerning the proposed regulation may be sent to the following address:

Mississippi State Board of Medical Licensure 1867 Crane Ridge Drive, Suite 200-B Jackson, MS 39216